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Bib Data Sheet

CONFIRMATION NO. 7647

<b>SERIAL NUMBER</b> 10/596,535	<b>FILING OR 371(c) DATE</b> 06/15/2006 <b>RULE</b>	<b>CLASS</b> 433	<b>GROUP ART UNIT</b> 3776	<b>ATTORNEY DOCKET NO.</b> 0032.0007US1
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**APPLICANTS**

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**\*\* CONTINUING DATA \*\*\*\*\***

This application is a 371 of PCT/US05/34606 09/29/2005  
 which claims benefit of 60/702,460 07/25/2005

**\*\* FOREIGN APPLICATIONS \*\*\*\*\***

**IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\***

\*\* 03/13/2007

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes Allowance <input checked="" type="checkbox"/> no Met after	<b>STATE OR COUNTRY</b> RUSSIAN FEDERATION	<b>SHEETS DRAWING</b> 15	<b>TOTAL CLAIMS</b> 61	<b>INDEPENDENT CLAIMS</b> 18
Verified and Acknowledged	Examiner's Signature _____	Initials _____			

**ADDRESS**

29127

**TITLE**

METHOD AND APPARATUS FOR TOOTH REJUVENATION AND HARD TISSUE MODIFICATION

<b>FILING FEE RECEIVED</b> 3205	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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